

## **Town of LaGrange Parks & Recreation Fall Festival Vendor Registration Form**



Name	Vendor/Business Name
Full Address	
Phone #	E-Mail Address
TYPE OF MERCHANDISE/BOOT	
Please describe in detail what	tivity or item you will be offering at your booth:
Do you require electricity?	Vendors must supply their own tables and chairs.  Will you donate an event prize? If so, explain
and return completed applicat	pick up a Health Dept. Permit application in the Recreation Office An and permit fee to Recreation Office at least 30 days prior to event or vendors will be required to provide Certificate of Insurance naminal insured.
Non-Profit GroupY	N
ment and the Community Day being -Facility (s), and Equipme sume all risks and responsibilit Further agree to indemnify and	ARMLESS:  Innowing fully that the Town of LaGrange Parks and Recreation Department of the thick special event and all aspects associated with the second of the thick of the thick of the thick of possible injury involved with participating in this special event. 3. Told harmless the Town of LaGrange, department or employees, to insulting from my participation in this event.
Vendor Signature	Date
Please note: Application does	t guarantee approval of a booth request. The Parks & Recreation Dir

Please mail registration form to:

Town of LaGrange Attn: Parks & Recreation Department 120 Stringham Rd. LaGrangeville, NY 12540 Fall Festival is Sunday, October 2nd
Noon-4pm
Freedom Park
Raindate: October 16th